ISSUE SLIP STAPLE AREA (for additional cross references)

POSIT!ON	INITIALS	ID NO.	DATE
FEE DETERMINATION	E:14		10-61-01
O.I.P.E. CLASSIFIER		14/	10/17/
FORMALITY REVIEW	H. 7	913	10/25/01
RESPONSE FORMALITY REVIEW	,		

INDEX OF CLAIMS

•	Rejected	N	Non-elected
=	Allowed	l	Interference
_	(Through numeral) Canceled	Α	Appeal
÷	Restricted	0	Objected

` <u>{</u>	÷	Restricted	0	Objected	
Clain	Date	Claim	Date	Claim	Date
Claim Chaire		Final		Final	
07/		51		101	
3 1	 - - - - - 	52 53		102	+++++
4 -		54		104	
<u> </u>		55		105	
9	 	57	 	106	+++++
8		58		108	
9 //		60		109	
		61		111	
120		62		112	
14		63		113	
15		65		115	
16		66		116	
17	+	68		117	
19		69	 	119	
20		70		120	
21 22		71 72		121	
23	+ + + + + + -	73	 	122	
24		74		124	
25		75 76		125	
27		77		126	
28		78		128	
30	} 	79 80		129	┼┼┼┼┼┼
31		81		131	
32		82		132	
33		83 84		133	╫┼┼┼┼
35		85		135	
36 37 i		86		136	
38		88		138	
39		89		139	
41	 	90 91		140	++++++++++++++++++++++++++++++++++++
42	++++	92	 	142	╽╎╽ ┼┼┼┼┤
43		93		143	
44 45		94 95	 	144	╎╏╏╏╏
46	 	96	 	146	
47		97		147	
48 2 49		98 99		148	╎╎╎┼┼┼┼ ┼┼┤
50		100		150	

If more than 150 claims or 10 actions staple additional sheet here

(LEFT INSIDE)

ch 75%